SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
96 JUN 10 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 361025 (0)

1. Corporation Name

UNIVERSITY LAKES, INC.

Principal Place of Business	Mailing Address
701 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131-2822	701 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131-2822

3. Date Incorporated or Qualified: 03/12/1970
3a. Date of Last Report: 01/23/1995
4. FEI Number: 59-1289332 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

COURTELIS, ALEC P.
701 BRICKELL AVENUE
SUITE 1400
MIAMI FL 33131-2822

10. **Name and Address of New Registered Agent**

81 Name: W. DOUGLAS PITTS
82 Street Address (P.O. Box Number is Not Acceptable): 701 BRICKELL AVENUE
83 SUITE 1400
84 City: MIAMI FL 85 Zip Code: 33131-2822

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE [signature] 6/7/96

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	COURTELIS, ALEC P	
STREET ADDRESS	701 BRICKELL AVE, SUITE 1400	
CITY-ST-ZIP	MIAMI FL 33131-2822	
TITLE	TD	☐ DELETE
NAME	KISLAK, JAY I	
STREET ADDRESS	701 BRICKELL AVE, SUITE 1400	
CITY-ST-ZIP	MIAMI FL 33131-2822	
TITLE	ASDV	☐ DELETE
NAME	PITTS, W. DOUGLAS	
STREET ADDRESS	701 BRICKELL AVE, SUITE 1400	
CITY-ST-ZIP	MIAMI FL 33131-2822	
TITLE	SV	☐ DELETE
NAME	KURPS, JAMES	
STREET ADDRESS	701 BRICKELL AVE, SUITE 1400	
CITY-ST-ZIP	MIAMI FL 33131-2822	
TITLE	V	☐ DELETE
NAME	VASSILAROS, ELIAS	
STREET ADDRESS	701 BRICKELL AVE, SUITE 1400	
CITY-ST-ZIP	MIAMI FL 33131-2822	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***1350.00 ****225.00

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 6/7/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0040476 CP